



**Connecticut Department of Environmental Protection
State Emergency Response Commission
Emergency Planning and Community Right-to-Know
Tier2 Submit Chemical Inventory Report Certification**

Facility/Municipality Information

Facility Name:

Facility Phone:

ext.

Fax:

Person's Email Address who submitted the electronic Tier2 Submit form:

Facility Address:

City/Town:

State:

Zip Code:

Telephone:

:

Reporting year consists of January 1 through December 31,

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of those individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with Section 22a-6 of the General Statutes, pursuant to Section 53a-157b of the General Statutes, and in accordance with any other applicable statute."

Signature of Preparer

Date

Name of Applicant (print or type)

Title (Print or type)

Persons who or municipalities that submit a Tier2 Submit Chemical Inventory form by e-mail, must also submit a signed Certification Page to the State Emergency Response Commission at the following address:

State Emergency Response Commission
c/o Department of Environmental Protection
Bureau of Materials Management & Compliance Assurance
Emergency Response and Spill Prevention Division
79 Elm Street, 4th Floor
Hartford, CT 06106-5127